

MULTIPLE  
FEE CAV  
(FOR USE  
FORM PTO-875)

PENDENT CLAIM  
ATION SHEET

SEARCHED  
107337469

FILING DATE

APPLICANT(S)

	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT		CLAIMS
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1			/				
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TOTAL IND.			/				
TOTAL DEP.			10				
TOTAL CLAIMS			11				

	AS FILED		AFTER 1 <sup>ST</sup> AMENDMENT		AFTER 2 <sup>ND</sup> AMENDMENT		CLAIMS
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
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99							
100							
TOTAL IND.							
TOTAL DEP.							
TOTAL CLAIMS							

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